Entiat School District
Online Course Request

Today's Date _____   When will course begin? _____

Course you're requesting _____

Name of Institution offering the course _____

Cost of Course _____

Reason for requesting course _____

_____

Scheduled End Date _____

Who is responsible for payment?   Circle one

District   or   Parent/Guardian

Request Approved   Request Denied

_____   _____

Principal Signature   _____   Date _____

Business Manager Signature _____ Date _____

Parent/Guardian agrees to pay the full amount of course with check, cash or money order made payable to the Entiat School District unless otherwise noted above.   Full payment must be made prior to course sign up.

Student Signature _____   Date _____

Parent Signature _____   Date _____